POSITION	INITIALS	ID NO.	DATE
<b>K</b> ing			
FEE DETERMINATION	mor		102/20/01
O.I.P.E. CLASSIFIER			1,1
FORMALITY REVIEW	SM	8/9	09-11-61
RESPONSE FORMALITY REVIEW	Ris	1076	01/12/0
	A	1, 7-6	07/11/0/

## INDEX OF CLAIMS

,	Rejected	N	Non-elected
	Allowed		Interference
	(Through numeral) Canceled	Α	Appeat
	Restricted	0	Objected

ماء ماء ١٠	. 06 20	
Ctator Control	Claim N X N O O See	Claim Date
3 NO 20 2 2	Claim 10 10 10 10 10 10 10 10 10 10 10 10 10	
	Final Original 8	Original Original
O V V V V V V V V V V V V V V V V V V V	Signal Paragraphics of the signal of the sig	
	51 4444	101
+ 1211 N N	500000	102
3 N / N		103
4 7000		104
5 4 4		106
6 14	<del>}                                      </del>	107
7 1	157 158	108
8	59	109
10 3 1	60	110
10   10   10   10   10   10   10   10	61	111
12 N	62	112
13	63	113
13 N 14 N	64	114
15 N	65	115
16	66	116
- 17 1X 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	67	117
18	68	118
- 19 N N	69	119
20 N N	70	120
21   y( ,	71	121
12 NUUUU	72	122
_ 23 N i	73	123
24	74	124
25   1/	75	125
26 N	76	126
27 N	77	127
28 N	78	128
29 N	79	130
30 14	80 81	131
31 M	82	132
32 N 33 M	83	133
33 N N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	84	134
33 M 34 N	85	135
36 7	86	136
36 N 37 N	87	137
38 /	88	138
39 N	89	139
40 N	90	140
41 1 1	91	141.
42 7	92	142
43	93	143
- 44 W	94	144
1 451111/11/11/12	95	145
	96	146
	97	147
	98	148
49	99	149
50 0000	100	hsq

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

Best Available Copy